

Behind the Scenes of Online Therapeutic Feedback in Blended Therapy for Depression

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Introduction

In Internet-delivered cognitive behavioral therapies, written feedback by therapists is a substantial part of therapy. But how should therapists give online feedback?

Objectives

- to identify therapist behaviors in online feedback,
- to identify the extent to which the therapists adhere to feedback instructions,
- and to explore whether therapist behaviors and adherence to feedback instructions are associated with patient outcomes.

Analysis

- qualitative content analysis **therapist behaviours**
- development checklist **therapist instruction adherence**
- correlations with patient outcomes (number of completed online sessions & symptom change scores)

Intervention

Blended CBT (10 online sessions & 5 F2F sessions) for depression in routine secondary mental healthcare.

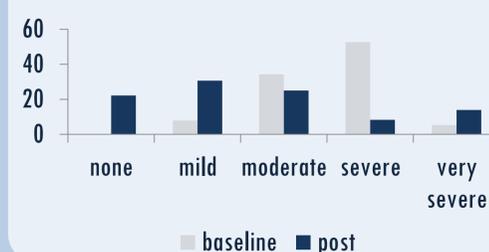
Feedback messages

45 patients received 219 feedback messages given by 19 therapists, with an average of 4,9 feedback messages per patient (SD 2,7; range 1-10). The average message contained 139 words (SD 95,4; range 1-504).

Depressive symptoms

After treatment, 31% of the patients showed a reduction of one level on the QIDS severity index, 28% a reduction of two levels and 8% of three levels. In total, almost 70% of the patients showed an improvement in terms of depressive symptoms.

Depressive symptom severity (%)



Therapist characteristics (n=19)

Characteristic	%
Female	84
Licensed CBT psychologist	43
Psychologist in CBT training	26
Mental health nurse	21
More than 5 years of experience	65
More than 10 iCBT treatments	35

Patient characteristics (n=45)

Female, %	73,3
Age, mean (SD; range)	35,9 (12,3; 21-64)
Completed online sessions, mean (SD; range)	6,3 (2,6; 2-11)
Completed face-to-face sessions, mean (SD; range)	7,1 (2,7; 2-13)
Completed online+F2F sessions, mean (SD; range)	13,4 (4,4; 5-23)
Treatment duration in weeks, mean (SD; range)	26,2 (11,2; 8-52)

Therapist behaviors

The most frequently used therapist behaviors were informing, encouraging, and affirming. However, these were not related to patient outcomes. Although infrequently used, confronting was positively correlated with session completion. This indicates that the more therapists confronted, more online sessions were completed.

Therapist instruction adherence

The therapists adhered to most of the feedback instructions. Only two feedback aspects were negatively correlated with session completion: the more therapists adhere to instructions containing structure and readability, the less online sessions were completed.

Category

Category	yes %
Begin with compliment	79,0
Summarize	73,1
Read homework	88,6
Use hypotheses	10,5
Give no solutions	95,6
Limit to 2 subjects*	95,4
Within 3 working days*	79,9
Refer to diary	26,9
Refer to monitoring	11,4
Refer to next session	41,6
Write short sentences**	61,6
Write short paragraphs**	74,4
Limit abbreviations	97,3
Limit misspellings	78,5
Limit emphasis	98,6
Use correct emoticons	100,0

*Structure: $\rho = -.342$, $P = .02$

** Readability $\rho = -.361$, $P = .02$

Category

Category	%
Emphasizing responsibility	0,1
Affirming	22,2
Clarifying the framework	3,9
Self-disclosure	0,0
Informing	27,5
Confronting*	0,4
Urging	3,9
Encouraging	23,4
Guiding	11,3
Questions	6,9

* $\rho = .342$, $P = .02$

Conclusions

- In line with previous research, therapist often make use of informing, encouraging, and affirming in online feedback, and refrain from using techniques, such as making self-disclosures, urging, and confronting.
- Online feedback instructions for therapists provide sufficient guidance to communicate in a supportive manner with patients. Interestingly, the adherence to some instructions seem to indicate that therapists have a reactive style to the behavior of patients.
- Instructions might be improved by adding more *therapeutic* techniques besides the focus on style and form.